

MAR 15 2005

Atty Docket No. 018563-002400US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner Lena Najarian

Group Art Unit 3626

OFFICIAL COMMUNICATION
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EXAMINER Lena Najarian

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of MUHAMMAD CHISHTI et al., Application No. 09/756885, filed January 9, 2001 for METHOD AND SYSTEM FOR DISTRIBUTING PATIENT REFERRALS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal (1 page)
2. Amendment (8 pages)

Number of pages being transmitted, including this page: 10

Dated: 3/15/05


Shemekia N. Brown


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PTO/SB/21 (09-04)

| | | | |
|--|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 09/758885 | |
| | Filing Date | January 9, 2001 | |
| | First Named Inventor | CHISHTI, MUHAMMAD | |
| | Art Unit | 3626 | |
| | Examiner Name | Lena Najarian | |
| Total Number of Pages in This Submission | 9 | Attorney Docket Number | 018563-002400US |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | Townsend and Townsend and Crew LLP | |
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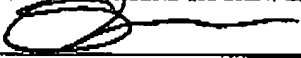
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PATENT
Attorney Docket No.: 018563-002400US

TOWNSEND and TOWNSEND and CREW LLP

By: 
Shemekia N. Brown

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

CHISHTI, Muhammad et al.

Application No.: 09/756,885

Filed: January 9, 2001

For: METHOD AND SYSTEM FOR
DISTRIBUTING PATIENT
REFERRALS

Customer No.: 20350

Confirmation No. 6714

Examiner: Lena Najarian

Technology Center/Art Unit: 3626

RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the restriction requirement of February 15, 2005, Applicants elect to prosecute Claims 1-30 and 46-59 of Group I, drawn to a method for referring patients to a certified group of practitioners. Applicants elect to prosecute these claims without traverse and herein cancel non-elected claims 31-45 and 60-70. A copy of pending claims 1-30 and 46-59 starts on page 2 of this document. Remarks begin on page 8.